

## **PART 1 MACT APPLICATION** Brief Informational Submission for CAA Section 112(j) State Form XXXXX (3-02) INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT

100 N. Senate Avenue

P.O. Box 6015

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IDEM - Office of Air Quality - Permits Branch

Facsimile Number: (317) 232-6749

http://www.IN.gov/idem/air/permits/index.html

NOTES:

- The purpose of the Part 1 MACT Application is to submit brief information about the processes and emissions units subject to Section 112(j) of the Clean Air Act (CAA) [40 CFR 63.53(a)].
- Send the original completed Part 1 MACT Application and two (2) copies to IDEM, OAQ. The <u>U.S. EPA Region V</u> and your <u>local agency</u> (if applicable) should also receive a copy of the application.
- This form may also be used to apply for a 112(j) applicability determination by including a cover letter in addition to this form that specifically requests a Section 112(j) applicability determination.
- This form is in "fillable" Adobe Acrobat PDF format. If you are unfamiliar with this format, please refer to IDEM's Q&A on PDF forms.

This application is due on May 15, 2002	<b>This</b>	app	lication	is	due	on	May	/ 15,	2002
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FOR OFFICE USE ONLY
PERMIT NUMBER:
DATE APPLICATION WAS RECEIVED:

	PART A: SOURCE INFORMATION					
1.	Source Name:	2.	Source ID: -	-		
3.	SIC Code:	4.	NAICS Code:			
5.	Provide the following information regarding the locat	ion	of this source.			
	Address:					
	City:		State:	ZIP Code:		
	County Name: Township Name:					
6.	Provide the mailing address for this source.					
	Address:					
	City:		State:	ZIP Code:		
	DART R. SOURCE	E D	ESCRIPTION			
PART B: SOURCE DESCRIPTION  7. Major/Area Source Determination: Is the source a major source of hazardous air pollutant (HAP) emissions?						
☐ No ☐ Yes ☐ Yes ☐ No ☐ Yes						
8. Provide a brief description of the source.						

PART C: LOCAL LIB	RARY INFORMA	ATION			
9. Date you filed a copy of your Part 1 MACT application wi					
10. Name of Library:					
11. Name of Librarian (optional):					
12. Provide the mailing address for the library:					
Address:					
City:	State:	ZIP Code:			
13. Internet Address (optional):					
14. Electronic Mail Address (optional):					
<b>15.</b> Library Telephone No.: ( ) –	<b>16.</b> Library Fac	csimile No. <i>(optional):</i> ( ) –			
PART D: CERTIFICATION OF TRUTH	ACCUBACY	AND COMPLETENESS			
☐ I certify under penalty of law that, based on information a information contained in this application are true, accurate Name (typed)	and belief formed	I after reasonable inquiry, the statements and			
Signature	Date				
Source-specific documentation may be used to provide the information requested in Part E. Please indicate if you are attaching supporting documentation either to compliment Part E or in lieu of completing Part E.  PART E: APPLICABILITY					
Please complete items 17 through 19 for each source ca source potentially subject to Section 112(j) of the Clean A		Source Category of (Example. Source Category 1 of 3)			
17. Source Category Identification: Does your source contain one or more types of emission points belonging to an affected source category potentially subject to Section 112(j) [40 CFR 63.50]?					
☐ No ☐ Yes — Identify the relevant source category:					
18. Identification of Types of Emission Points: If you checked "Yes" for Question 17, identify the types of emission points (e.g., processes or emissions units) belonging to the source category listed in Question 17.					
19. Identification of applicable 112(g) Determinations: Has a determination pursuant to Section 112(g) of the CAA been made for any process or emissions unit to which the requirements of Section 112(j) [40 CFR 63.50] will apply?					
☐ No ☐ Yes — Identify the process / emissions uni	it:				

Part 1 MACT Application FORM HAP-01 v03-02

## **DUPLICATE THIS PAGE AS NECESSARY.**

	PART E: APPLICABILITY					
	Please complete items 17 through 19 for each source category at your source potentially subject to Section 112(j) of the CAA.	Source Category of (Example. Source Category 2 of 3)				
17.	7. Source Category Identification: Does your source contain one or more types of emission points belonging to an affected source category potentially subject to Section 112(j) [40 CFR 63.50]?					
	□ No □ Yes – Identify the relevant source category:					
18.	Identification of Types of Emission Points: If you checked "Yes" for Copoints (e.g., processes or emissions units) belonging to the source category.					
19.	19. Identification of applicable 112(g) Determinations: Has a determination pursuant to Section 112(g) of the CAA been made for any process or emissions unit to which the requirements of Section 112(j) [40 CFR 63.50] will apply?					
	☐ No ☐ Yes − Identify the process / emissions unit:					
	PART E: APPLICABILITY					
	Please complete items 17 through 19 for each source category at your source potentially subject to Section 112(j) of the CAA.	Source Category of (Example. Source Category 3 of 3)				
17.	17. Source Category Identification: Does your source contain one or more types of emission points belonging to an affected source category potentially subject to Section 112(j) [40 CFR 63.50]?					
	□ No □ Yes – Identify the relevant source category:					
<b>18. Identification of Types of Emission Points:</b> If you checked "Yes" for Question 17, identify the types of emission points (e.g., processes or emissions units) belonging to the source category listed in Question 17.						
19.	Identification of applicable 112(g) Determinations: Has a determination been made for any process or emissions unit to which the requirements					
Ī	☐ No ☐ Yes — Identify the process / emissions unit:					